

LINE ITEM BUDGET FOR THIS PROGRAM

ORGANIZATION: _____ **PROGRAM:** _____

| | <u>CURRENT</u> – IF FUNDED (actual amounts) | | | | <u>PROPOSED</u> (estimated amounts) | | |
|--------------------------|--|--------------------------|-------------------------|--|--|--------------------------|-------------------------|
| LINE ITEM | CDBG AMOUNT | OTHER SOURCES | TOTAL BUDGET | | CDBG AMOUNT | OTHER SOURCES | TOTAL BUDGET |
| Personnel: Salaries | | | | | | | |
| Fringe | | | | | | | |
| Subtotal: personnel | | | | | | | |
| Travel | | | | | | | |
| Rent/Lease | | | | | | | |
| Utilities | | | | | | | |
| Telephone | | | | | | | |
| Insurance | | | | | | | |
| Supplies | | | | | | | |
| Printing | | | | | | | |
| Postage | | | | | | | |
| Travel | | | | | | | |
| Consultant/Contracts * | | | | | | | |
| Other (specify): | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Capital Item(s) specify: | | | | | | | |
| TOTAL: | | | | | | | |

*Consultant/contract workers **MUST** be documented under Minimum Eligibility Criteria, section g of application

OTHER FUNDING SOURCES FOR THIS PROGRAM

AGENCY: _____ PROGRAM: _____

| LIST OTHER SOURCES (include volunteer & donated services/resources) | | | | | |
|---|-------------------------------------|-----------------|--|-------------------------------------|-----------------|
| | <u>CURRENT</u> - IF FUNDED (actual) | | | <u>PROPOSED</u> (estimated amounts) | |
| | <u>Sources</u> | <u>Amounts:</u> | | <u>Sources</u> | <u>Amounts:</u> |
| FUNDING SECURED (confirmed) | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| FUNDING PENDING (include notification date) | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| DONATED GOODS & SERVICES (estimate value if unknown) | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| TOTAL: | | | | | |

STAFF COST ALLOCATION PLAN FOR THIS PROGRAM

AGENCY: _____ PROGRAM: _____

| SALARY & FRINGE COST ALLOCATION | | | | | | | |
|---|-----------|---------------------------|----------------|------------------------------------|------|------------------------------|---------------------------------------|
| Staff Name | Job Title | Gross Annual Salary | Hourly rate | Salary Allocation (CDBG amount) | | Fringe Cost Allocation | Salary & Fringe Cost Allocation |
| | | | | % | Cost | | |
| <u>CURRENT</u> PROGRAM (7/1/11 – 6/30/12) | | | | | | | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |
| 5. | | | | | | | |
| 6. | | | | | | | |
| 7. | | | | | | | |
| TOTALS: | | | | | | | |
| <u>PROPOSED</u> PROGRAM (7/1/12 – 6/30/13) | | | | | | | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4.. | | | | | | | |
| 5. | | | | | | | |
| 6. | | | | | | | |
| 7. | | | | | | | |
| TOTALS: | | | | | | | |

STAFF FUNCTIONS FOR THIS PROGRAM

AGENCY: _____ **PROGRAM:** _____

[illegible]